



# STATE OF MAINE Bureau of Insurance



## APPLICATION FOR SURPLUS LINES AUTHORITY

Effective 9/21/01 payment must be submitted with all applications. See attached Fee Schedule

**IMPORTANT INFORMATION** on page 2

For Bureau Use Only

LIC#:

**NOTE:** To apply for Surplus Lines Authority you must be licensed as a Property & Casualty Producer.

**NONRESIDENTS:** To apply for Surplus Lines Authority you must do one of the following: **(check one)**

☐ maintain all Maine records in an office located in Maine staffed by a producer with surplus lines authority;

Provide name & address of office located in Maine:

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☐ transact only liability insurance business on behalf of a purchasing group and agree to produce all surplus lines records in this state within 14 days from a request of the Superintendent; or

Please provide name of registered Risk Purchasing Group:

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☐ provide a home state certification, less than 90 days old, verifying license with surplus lines authority.

A. Full Legal Name (please type or print clearly)		B. Social Security Number	[ ]
C. Complete Business Name		D. Federal Identification Number	
E. Complete Business Mailing Address (principal place of insurance business) (include street address, if mail goes to PO Box)			[ ]
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F. Home Mailing Address			[ ]
G. Business Phone Number	H. Home Phone Number	I. Date of Birth	[ ]

## SURPLUS LINES AUTHORITY APPLICATION (Page 2)

J. Have you ever been convicted of, or pled nolo contendere (no contest) to any misdemeanor or felony, or do you currently have pending against you any misdemeanor or felony charges? [ ]  
[ ] **Yes** [ ] **No** If **Yes**, please attach certified copies of indictment or final judgement and commitment .

K. Please include an executed **SURETY BOND** in the amount of **\$20,000** (page 3). [ ]

Applicant's signature: \_\_\_\_\_ Dated: \_\_\_\_\_ [ ]

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### **IMPORTANT INFORMATION**

**INCOMPLETE APPLICATIONS MAY BE RETURNED (please type or print clearly).**

**Trade Names:** A licensee doing business under any name other than the licensee's legal name is required to notify the Superintendent prior to using the trade name.

**Maine Law:** Requires notification to the Superintendent within 30 days of: changes in business address, telephone number, name or other material change in the condition or qualifications set forth in the original application. This requirement includes disciplinary action taken against any insurance license or any criminal conviction other than a traffic violation. Failure to notify the Superintendent within 30 days may result in the automatic levying of a late fee penalty in accordance with Title 24-A MRSA §1419.

**Make check payable to: Treasurer, State of Maine**

**RETURN application and fees to:** LICENSING  
BUREAU OF INSURANCE  
34 STATE HOUSE STATION  
AUGUSTA ME 04333-0034  
Phone : (207) 624-8412 or (207) 624-8413

**E-mail us at:** susan.c.blaisdell@state.me.us  
or  
debra.j.ayotte@state.me.us

**Visit us at our web page:** [maineinsurancereg.org](http://maineinsurancereg.org)

# MAINE SURPLUS LINES INSURANCE PRODUCER'S BOND

BOND # \_\_\_\_\_

## KNOW ALL PERSONS BY THESE PRESENTS

THAT \_\_\_\_\_  
(Name of Applicant)

of \_\_\_\_\_ as principal, and  
(City, State)

\_\_\_\_\_ of \_\_\_\_\_  
(Name of Surety Company) (Place of Business)

as surety, are held and firmly bound unto the State of Maine, as Oblige in the sum of **TWENTY THOUSAND DOLLARS (\$20,000)** to the payment of which we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

The condition of this obligation is such that if the above named Producer who has been licensed as a Surplus Lines Insurance Producer in accordance with Title 24-A of the Maine Revised Statutes of 1964, complies with all the requirements of Title 24-A, §1606 of the Maine Revised Statutes of 1964 as amended, and shall be conditioned upon the full accounting and due payment to those entitled thereto, of funds coming into the producer's possession through insurance transactions under said license, then this obligation shall be void, otherwise to remain in full force and effect.

This bond shall be continuous in nature and remain in force until the surety is released from liability by the Insurance Commissioner or until cancelled by the surety. Without prejudice to any prior liability accrued, the surety may cancel this bond upon 30 days' advance written notice to the Licensee and the Superintendent.

Pursuant to Title 24-A M.R.S.A. § 3105, either (1) a power of attorney form authorizing the undersigned to issue this bond amendment/cancellation is attached thereto; or (2) this bond has been issued by a corporate officer authorized to issue bonds, and a "Board of Directors' Resolution" is attached evidencing the officer's authority to issue bonds.

Signed, Sealed and Dated this \_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_

Witnessed:

\_\_\_\_\_ L.S.  
(Must be signed by witness) (Signature of Applicant)

\_\_\_\_\_  
(Name of Surety Company authorized to do business in Maine)

BY: \_\_\_\_\_ Seal



**STATE OF MAINE  
INDIVIDUAL/BUSINESS ENTITY APPLICATION FEE SCHEDULE**

**INDIVIDUAL FEES only** (Business entity (agency) fees on page 2)

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**Producer Application fee of \$15 plus**

**Note:** Please submit only one application fee for each producer application submitted regardless of the number of authorities chosen on that application.

**Producer License fees:** (License fees are for each authority selected on the application.)

Authority	Resident Fees	Nonresident Fees
<b>Full Authorities</b>		
Life	\$30	\$70
Health	\$30	\$70
Life & Health (combined)	\$30	\$70
Property	\$30	\$70
Casualty	\$30	\$70
Property & Casualty (combined)	\$30	\$70
Personal Lines	\$30	\$70
Variable Contracts	\$30	\$70
Independent Producer	\$70	\$150
<b>Limited Authorities</b>		
Credit	\$30	\$70
Travel & Baggage	\$30	\$70
Auto Rental Suppl. Liability	\$30	\$70
Limited Fixed Annuity	\$30	\$70
Limited Variable Annuity	\$30	\$70
Mechanical Breakdown	\$30	\$70
Title	\$30	\$70

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**Surplus Lines Authority:** Requires completion of the Surplus Lines Application.

**Application fee of \$15 plus**

License Fee:                      Resident **\$150**                      Nonresident **\$150**

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**Adjuster:** Application fee of **\$15** plus

License fees:              Resident **\$30**                      Nonresident **\$60**

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**Consultant:** Application fee of **\$25** plus

License Fees:              Resident              Life & Health **\$50**                      Property & Casualty **\$50**  
   Nonresident              Life & Health **\$100**                      Property & Casualty **\$100**

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## **BUSINESS ENTITY (Agency) FEES**

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### **Business Entity Application fee of \$15 plus:**

<b><u>Adjusting Firm License:</u></b>	Resident <b>\$30</b>	Nonresident <b>\$60</b>
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<b><u>Producer Agency License:</u></b>	Resident <b>\$30</b>	Nonresident <b>\$70</b>
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<b><u>Motor Vehicle Rental:</u></b>	Resident <b>\$30</b>	Nonresident <b>\$70</b>
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### **Branch Registration: No application fee is required.**

<b>Registration Fee</b>	Resident <b>\$25</b>	Nonresident <b>\$25</b>
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### **Application fee of \$25 plus**

<b><u>Consulting Firm License:</u></b>	Resident <b>\$50</b>	Nonresident <b>\$100</b>
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### **Make all checks Payable to: Treasurer State of Maine**

**Note:** For each application submitted, please include one check for the total amount due. If paying by credit card, please complete the form that is available on our website:

**maineinsurancereg.org**  
**Producer Business Entity Information**  
**Licensing and Registration – Forms & Information**  
**Billing**  
**Authorization of Credit Card Payment**

Any questions concerning fees, please contact Ingrid Garand at (207)624-8465.

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